PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

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U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

U.S. Patent and Trademst Office; U.S. Department of the Page 1/31/2007. OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/598,443			ing Date 30/2006	To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY 🛛				HER THAN	
Н	FOR	N	NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	-	N/A		N/A			N/A	1 LL (0)	i	N/A	TLE (0)	
	SEARCH FEE (37 CFR 1.16(k), (i), (ii)		N/A		N/A			N/A		1	N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p), (	Ε	N/A		N/A			N/A		1	N/A		
	TAL CLAIMS CFR 1.16(i))		1 minus 20 =		• 0			X \$25 =	0	OR	x s =		
IND	EPENDENT CLAIM CFR 1.16(h))	s	1 minus 3 =		• 0			X \$100 =	0	1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and drav sheets of paper, the applica is \$250 (\$125 for small enti- additional 50 sheets or frac 35 U.S.C. 41(a)(1)(G) and			n size fee due for each n thereof. See							
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(j))									1			
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	0	1	TOTAL		
	APPLICATION AS AMENDED – PART II  (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT	10/25/2007	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1 160))	• 7	Minus	20		= 0	П	X \$25 =	0	OR	x s =		
	Independent (37 CFR 1.16(h))	• 4	Minus	3		= 1	П	X \$105 =	105	OR	x s =		
Ž	Application Size Fee (37 CFR 1.16(s))												
^	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))									OR			
								TOTAL ADD'L FEE	105	OR	TOTAL ADD'L FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())		Minus				П	x \$ =		OR	x \$ =		
	Independent (37 CFR 1,16(h))		Minus	***		-	П	x \$ =		OR	x s =		
ä	Application Size Fee (37 CFR 1.16(s))						П			1			
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
										OR	TOTAL ADD'L FEE		
** 16	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Pair For "N THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Pair For "N THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Pair For "(Total or independent) is the highest number found in the appropriate box in column 1.												

This collection of information is equated by 37 CER 1.10. The information is required to obtain or retain a benefit by the public which is in life (and by the USETO to noceess) an implication. Confidentiality is governed by 85 USE v. 22 and 37 CER 1.4. If this collection is estimated to state 2 relaminate to complete in condition gathering, preparing, and submitting the completed application form to the USETO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or segeopositons for endouring this burford, ashed be sent to the CEMPT (information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO C. Commissioner for Patients, P.O., Box 1450, Alexandria, VA 22313-1450, DR NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.